PTO/SB/06 (08-03)
Approved for use through 7/31/2006. OMB 0651-0032
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|],. | PA | TENT APPL | ICATIO | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | CLIMINAL | ON RECORD | intermation un | less it disp | lays a valid OMB | control number |
|---------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------|--------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|----------------------|-----------------|--------------|--------------------------------------------------|--------------------|
| }- | | | Subs | titute for Form F | PTO-875 | | | · Applica | 09175 | 7799/ |
| | | CLAIMS | AS FILE | D – PART I | • | | | | OTUE | D. Tillain |
| \vdash | (Column 1) | | | (| Column 2) | SMALL | ENTITY | OR | | r than . Entity |
| FOR NUMBER FILED | | | D . NUN | MBER EXTRA | RATE | FEE | 7 | | 1 | |
| BASIC FEE (37 CFR 1.16(a)) | | | | | | 1 | | 4 | RATE | FEE |
| TOTAL CLAIMS (37 CFR 1.16(c)) | | | -1 | 20 - 1 | | ┨┠── | - s | OR | . | \$ |
| IN | DEPENDENT CLA | MMS | minus 20 = | | • | X \$= | | OR | = | |
| _ | CFR 1.16(b)) | | minus 3 = | | | = | | OR | X.2= | |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) | | | | | | + s= | | OR | +s = | |
| . 14 | * If the difference in column 1 is less than zero, enter "0" in column 2. | | | | | TOTAL | | . OR | TOTAL | |
| CLAIMS AS AMENDED – PART II | | | | | | | | - | · | L |
| : | 3 11 | 0/2 | | | | | , | | | |
| _ | | CLAIMS | . | (Column 2) | (Column 3) | SMALL | ENTITY | / OR | OTHER SMALL | R THAN ENTITY |
| AMENDMENT A | | REMAINING | | HIGHEST NUMBER | PRESENT | RATE | ADDI- | 1 | | |
| | | AFTER AMENDMENT | | PREVIOUSLY PAID FOR | EXTRA | | TIONAL | | RATE | ADDI- TIONAL |
| | Total (37 CFR 1.16(c)) | <u>に</u> 2) | Minus | 1" (27) | = () | X \$ = | 7 | | | FEE |
| | Independent (37 CFR 1,16(b)) | 1 | Minus | 1 2 | = // | | / | OR | × 5 | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4) | | | | | X \$= | / | OR | x \$= | |
| | I | THOUGH WILLIAM | LE DEFENE | JENT CLAIM (37.0 | FR 1.16(197) | +5 | | OR | / s= | |
| | | | | * | • | TOTAL / ADD'L FEE | | OR/ | TOTAL ADD'L FEE | |
| • | <u> </u> | (Column 1) CLAIMS | | (Column 2) | (Column 3) | | | | | |
| AMENDMENT B | | REMAINING | | HIGHEST NUMBER | PRESENT | RATE | ADDI- | 1 | 5475 | |
| | | AFTER AMENDMENT | | PREVIOUSLY PAID FOR | EXTRA | | TIONAL FEE | | RATE | ADDI- TIONAL |
| | Total (37 CFR 1.16(c)) | | Minus | •• | = : | X \$ = ' | | ł | | FEE |
| | Independent (37 CFR 1.16(b)) | • | Minus | *** | = | | | OR | × \$= | |
| | FIRST PRESENT | ATION OF MULTIPL | E DEPEND | ENT CLASS (27.0) | | X \$= | | OR | X \$= | |
| | - · · · · · · · · · · · · · · · · · · · | | | Citt CLAIM (STC) | K 1.16(d)) | + \$ = | | OR | +\$= | |
| | | - | | J. | | ADD'L FEE | | OR | TOTAL ADD'L FEE | |
| | | (Column 1) | | (Column 2) | (Column 3) | | | | ٠ ـ | |
| AMENDMENT C | j | CLAIMS REMAINING | | HIGHEST NUMBER | PRESENT | RATE | ADE | ٦ | | |
| | | AFTER AMENDMENT | | PREVIOUSLY PAID FOR | EXTRA | TOTIE | ADDI- TIONAL | | RATE | ADDI- TIONAL |
| | Total (37 CFR 1.16(c)) | • | Minus | ** | = . | | FEE | | | FEE |
| | Independent (37 CFR 1.16(b)) | • | Minus | *** | = | X \$= | | OR _ | X \$= | |
| | | ATION OF MULTIPLE | E DEBTHE | THE COLUMN TO SERVICE | L | X \$= | | OR | x s= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | | +\$ = | | OR . | + 5 = | |
| | ff the entry in an | lumo 4 le ta # | | · | | TOTAL ADD'L FEE | _ | | TOTAL ADD'L FEE | |
| | | lumn 1 is less tha lumber Previously | | | | | | | | |
| | | umber Previously mber Previously | raio roi | IN THIS SPACE I | s less than 3, ent | er " 3". | | | | |

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.